

ARIZONA CORPORATION COMMISSION
UTILITIES DIVISION

ANNUAL REPORT MAILING LABEL – MAKE CHANGES AS NECESSARY

S

W-02822A
Sleepy Hollow Mobile Home Estates
6001 S. Palo Verde
Tucson AZ 85706

RECEIVED

MAR 04 2005

AZ Corporation Commission
Director Of Utilities

ANNUAL REPORT

FOR YEAR ENDING

12	31	2004
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FOR COMMISSION USE

ANN04	04
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COMPANY INFORMATION

Company Name (Business Name) <u>SLEEPY HALLOW MOBILE HOME</u> ^{ENTER}		
Mailing Address <u>6001 SO. PALO VERDE</u>		
<u>TUCSON</u> (City)	<u>AZ</u> (State)	<u>85706</u> (Zip)
<u>520-4407529</u> Telephone No. (Include Area Code)	<u>520-4407529</u> Fax No. (Include Area Code)	<u>520-4407529</u> Pager/Cell No. (Include Area Code)
Email Address _____		
Local Office Mailing Address _____		
_____ (City)	_____ (State)	_____ (Zip)
Local Office Telephone No. (Include Area Code)	Fax No. (Include Area Code)	Pager/Cell No. (Include Area Code)
Email Address _____		

MANAGEMENT INFORMATION

Management Contact: _____			
_____ (Name)		_____ (Title)	
_____ (Street)	_____ (City)	_____ (State)	_____ (Zip)
Telephone No. (Include Area Code)	Fax No. (Include Area Code)	Pager/Cell No. (Include Area Code)	
Email Address _____			
On Site Manager: <u>DANNY NG</u>			
_____ (Name)			
<u>615 W. ALTURAS ST.</u> (Street)	<u>TUCSON</u> (City)	<u>AZ</u> (State)	<u>85705</u> (Zip)
<u>520-6247775</u> Telephone No. (Include Area Code)	_____ Fax No. (Include Area Code)	<u>520-4407529</u> Pager/Cell No. (Include Area Code)	
Email Address _____			

☐ Please mark this box if the above address(es) have changed or are updated since the last filing.

Statutory Agent: _____

(Name)

(Street)

(City)

(State)

(Zip)

Telephone No. (Include Area Code)

Fax No. (Include Area Code)

Pager/Cell No. (Include Area Code)

Attorney: ALBERT HARTWELL

(Name)

177
(Street)

N. CHURCH
(City)

AVENUE SUITE 200
(State)

TUCSON
85701
(Zip)

Telephone No. (Include Area Code)

Fax No. (Include Area Code)

Pager/Cell No. (Include Area Code)

☐ Please mark this box if the above address(es) have changed or are updated since the last filing.

OWNERSHIP INFORMATION

Check the following box that applies to your company:

☐ Sole Proprietor (S)

☐ C Corporation (C) (Other than Association/Co-op)

☒ Partnership (P)

☐ Subchapter S Corporation (Z)

☐ Bankruptcy (B)

☐ Association/Co-op (A)

☐ Receivership (R)

☐ Limited Liability Company

☐ Other (Describe) _____

COUNTIES SERVED

Check the box below for the county/ies in which you are certificated to provide service:

☐ APACHE

☐ COCHISE

☐ COCONINO

☐ GILA

☐ GRAHAM

☐ GREENLEE

☐ LA PAZ

☐ MARICOPA

☐ MOHAVE

☐ NAVAJO

☒ PIMA

☐ PINAL

☐ SANTA CRUZ

☐ YAVAPAI

☐ YUMA

☐ STATEWIDE

COMPANY NAME

Sleepy Hollow Public Home Estate

UTILITY PLANT IN SERVICE

Acct. No.	DESCRIPTION	Original Cost (OC)	Accumulated Depreciation (AD)	O.C.L.D. (OC less AD)
301	Organization			
302	Franchises			
303	Land and Land Rights	30,000.00	3,000.00	27,000.00
304	Structures and Improvements			
307	Wells and Springs	5,000.00	2,000.00	3,000.00
311	Pumping Equipment	7,000.00	1,000.00	6,000.00
320	Water Treatment Equipment	2,000.00	500.00	1,500.00
330	Distribution Reservoirs and Standpipes	11,000.00	7,600.00	3,400.00
331	Transmission and Distribution Mains	125,000.00	37,500.00	87,500.00
333	Services	10,000.00	1,000.00	9,000.00
334	Meters and Meter Installations	3,000.00	3,000.00	0.00
335	Hydrants			
336	Backflow Prevention Devices			
339	Other Plant and Misc. Equipment			
340	Office Furniture and Equipment			
341	Transportation Equipment			
343	Tools, Shop and Garage Equipment			
344	Laboratory Equipment			
345	Power Operated Equipment	2,000.00	1,000.00	1,000.00
346	Communication Equipment			
347	Miscellaneous Equipment			
348	Other Tangible Plant			
	TOTALS	195,000.00	59,400.00	135,600.00

This amount goes on the Balance Sheet Acct. No. 108

COMPANY NAME Sleepy Hollow Public Home Estate

CALCULATION OF DEPRECIATION EXPENSE FOR CURRENT YEAR

Acct. No.	DESCRIPTION	Original Cost (1)	Depreciation Percentage (2)	Depreciation Expense (1x2)
301	Organization			
302	Franchises			
303	Land and Land Rights			
304	Structures and Improvements			
307	Wells and Springs			
311	Pumping Equipment			
320	Water Treatment Equipment			
330	Distribution Reservoirs and Standpipes			
331	Transmission and Distribution Mains			
333	Services			
334	Meters and Meter Installations			
335	Hydrants			
336	Backflow Prevention Devices			
339	Other Plant and Misc. Equipment			
340	Office Furniture and Equipment			
341	Transportation Equipment			
343	Tools, Shop and Garage Equipment			
344	Laboratory Equipment			
345	Power Operated Equipment			
346	Communication Equipment			
347	Miscellaneous Equipment			
348	Other Tangible Plant			
	TOTALS			

THE SYSTEM WAS BUILT IN 1947. THE SYSTEM IS 58 YEARS OLD.

THIS SYSTEM IS INSIDE THE TRC PARK ONLY.

THE SYSTEM TAKE GROUND WATER WELL ONLY.

THE PARK TENANTS TUCKER CITY.

FOR ONLY THE PARK.

USE ONLY.

WE CAN TURN INTO MOUNTAIN.

WATER WITHIN (5) MINUTES.

WATER THE WELL IS DRY UP WE WILL GO IN CITY WATER.

DO MY PR OWN

This amount goes on the Comparative Statement of Income and Expense Acct. No. 403.

COMPANY NAME

Sleepy Hollow Mobile Home Estates

BALANCE SHEET

Acct No.		BALANCE AT BEGINNING OF YEAR	BALANCE AT END OF YEAR
	ASSETS		
	CURRENT AND ACCRUED ASSETS		
131	Cash	\$	\$
134	Working Funds		
135	Temporary Cash Investments		
141	Customer Accounts Receivable	M/A	
146	Notes/Receivables from Associated Companies		
151	Plant Material and Supplies		
162	Prepayments		
174	Miscellaneous Current and Accrued Assets		
	TOTAL CURRENT AND ACCRUED ASSETS	\$	\$
	FIXED ASSETS		
101	Utility Plant in Service	\$	\$
103	Property Held for Future Use	M/A	
105	Construction Work in Progress		
108	Accumulated Depreciation – Utility Plant		
121	Non-Utility Property		
122	Accumulated Depreciation – Non Utility		
	TOTAL FIXED ASSETS	\$	\$
	TOTAL ASSETS	\$	\$

NOTE: The Assets on this page should be equal to **Total Liabilities and Capital** on the following page.

THIS IS A TRL
PARK. WE HAVE A PRIVATE
WATER WELL. THE WATER IS
ONLY FOR THE TRL TENANT
USE ONLY. WE CAN TURN ON
TO TUCKER CITY WATER WITHIN
(5) MINUTE.
D. MY
PPE own.

COMPANY NAME

BALANCE SHEET (CONTINUED)

Acct. No.		BALANCE AT BEGINNING OF YEAR	BALANCE AT END OF YEAR
	LIABILITIES		
	CURRENT LIABILITIES		
231	Accounts Payable	\$	\$
232	Notes Payable (Current Portion)		
234	Notes/Accounts Payable to Associated Companies		
235	Customer Deposits		
236	Accrued Taxes		
237	Accrued Interest		
241	Miscellaneous Current and Accrued Liabilities		
	TOTAL CURRENT LIABILITIES	\$	\$
	LONG-TERM DEBT (Over 12 Months)		
224	Long-Term Notes and Bonds	\$	\$
	DEFERRED CREDITS		
251	Unamortized Premium on Debt	\$	\$
252	Advances in Aid of Construction		
255	Accumulated Deferred Investment Tax Credits		
271	Contributions in Aid of Construction		
272	Less: Amortization of Contributions		
281	Accumulated Deferred Income Tax		
	TOTAL DEFERRED CREDITS	\$	\$
	TOTAL LIABILITIES		
	CAPITAL ACCOUNTS		
201	Common Stock Issued		
211	Paid in Capital in Excess of Par Value		
215	Retained Earnings		
218	Proprietary Capital (Sole Props and Partnerships)		
	TOTAL CAPITAL	\$	\$
	TOTAL LIABILITIES AND CAPITAL	\$	\$

N/A

We just seal water to the TRC park tenants only.

THE GROUND WATER WELL IS INSIDE THE TRC PARK

D. 129

PR owner

COMPANY NAME SLEEPY Hollow Public Home & State

COMPARATIVE STATEMENT OF INCOME AND EXPENSE

Acct. No.	OPERATING REVENUES	PRIOR YEAR	CURRENT YEAR
461	Metered Water Revenue	\$ 13,447.00	\$ 13,607.20
460	Unmetered Water Revenue		0
474	Other Water Revenues		0
	TOTAL REVENUES	\$ 13,447.00	\$ 13,607.20
	OPERATING EXPENSES		
601	Salaries and Wages	\$ 700.00	\$ 750.00
610	Purchased Water		
615	Purchased Power	3,971.00	4,100.00
618	Chemicals		
620	Repairs and Maintenance	900.00	920.00
621	Office Supplies and Expense	96.00	101.00
630	Outside Services	1,215.00	1,315.00
635	Water Testing	4,011.30	4,011.30
641	Rents		
650	Transportation Expenses		
657	Insurance – General Liability	990.00	1,200.00
659	Insurance - Health and Life		
666	Regulatory Commission Expense – Rate Case		
675	Miscellaneous Expense		
403	Depreciation Expense		
408	Taxes Other Than Income		
408.11	Property Taxes	979.68	855.00
409	Income Tax		
	TOTAL OPERATING EXPENSES	\$ 12,863.08	\$ 13,246.30
	OPERATING INCOME/(LOSS)	\$	\$
	OTHER INCOME/(EXPENSE)		
419	Interest and Dividend Income	\$	\$
421	Non-Utility Income		
426	Miscellaneous Non-Utility Expenses		
427	Interest Expense		
	TOTAL OTHER INCOME/(EXPENSE)	\$	\$
	NET INCOME/(LOSS)	\$ 583.92	\$ 360.88

COMPANY NAME

SUPPLEMENTAL FINANCIAL DATA

Long-Term Debt

	LOAN #1	LOAN #2	LOAN #3	LOAN #4
Date Issued				
Source of Loan				
ACC Decision No.				
Reason for Loan				
Dollar Amount Issued	\$	\$	\$ N/A	\$
Amount Outstanding	\$	\$	\$	\$
Date of Maturity				
Interest Rate	%	%	%	%
Current Year Interest	\$	\$	\$	\$
Current Year Principle	\$	\$	\$	\$

Meter Deposit Balance at Test Year End

\$ N/A

Meter Deposits Refunded During the Test Year

\$

COMPANY NAME

Sceeply Hadden Mobile Home Estates

WATER COMPANY PLANT DESCRIPTIONWELLS

ADWR ID Number*	Pump Horsepower	Pump Yield (gpm)	Casing Depth (Feet)	Casing Diameter (Inches)	Meter Size (inches)	Year Drilled
604101	25	140 US GAL	150'	3"	3"	1990

* Arizona Department of Water Resources Identification Number

OTHER WATER SOURCES

Name or Description	Capacity (gpm)	Gallons Purchased or Obtained (in thousands)
IF WATER WELL BREAK DOWN WE TURN ON TUCSON CITY WATER WITHIN (5) MINUTE		

BOOSTER PUMPS		FIRE HYDRANTS	
Horsepower	Quantity	Quantity Standard	Quantity Other

CITY FIRE HYDRANTS

STORAGE TANKS		PRESSURE TANKS	
Capacity	Quantity	Capacity	Quantity
		5000 US GAL	(1)
N/A			

COMPANY NAME

Sleepy Hollow N.A. E&B

WATER COMPANY PLANT DESCRIPTION (CONTINUED)**MAINS**

Size (in inches)	Material	Length (in feet)
2	Copper + PVC	6500
3		
4		
5		
6		
8		
10		
12		

2000 PVC
4500 Copper**CUSTOMER METERS**

Size (in inches)	Quantity
5/8 X 3/4	
3/4	105
1	
1 1/2	
2	
Comp. 3	
Turbo 3	
Comp. 4	
Tubo 4	
Comp. 6	
Tubo 6	

For the following three items, list the utility owned assets in each category.

TREATMENT EQUIPMENT:

None

STRUCTURES:FENCES 100' to Enclosed WATER Well
AND PRESSURE TANK.**OTHER:**

COMPANY NAME:

WATER USE DATA SHEET BY MONTH FOR CALENDAR YEAR 2004

MONTH	NUMBER OF CUSTOMERS	GALLONS SOLD	GALLON PUMPED (Thousands)
JANUARY	90		44,900.00
FEBRUARY	90		44,950.00
MARCH	92		44,900.00
APRIL	108		44,990.00
MAY	108		45,000.00
JUNE	109		51,000.00
JULY	101		53,000.00
AUGUST	100		53,500.00
SEPTEMBER	100		52,000.00
OCTOBER	107		46,000.00
NOVEMBER	105		48,000.00
DECEMBER	106		42,000.00
TOTAL		N/A	567,240.00

Is the Water Utility located in an ADWR Active Management Area (AMA)?

☒ Yes

☐ No

Does the Company have an ADWR Gallons Per Capita Per Day (GPCPD) requirement?

☐ Yes

☒ No

If yes, provide the GPCPD amount: _____

What is the level of arsenic for each well on your system. 0.1 MG/L ^{0.1}mg/l
(If more than one well, please list each separately.)

Note: If you are filing for more than one system, please provide separate data sheets for each system.

COMPANY NAME SLEEPY Hollow Dr. B. L. Home ⁴⁸⁸⁷⁰⁹ YEAR ENDING 12/31/2004

PROPERTY TAXES

Amount of actual property taxes paid during Calendar Year 2004 was: \$ 855.02

Attach to this annual report proof (e.g. property tax bills stamped "paid in full" or copies of cancelled checks for property tax payments) of any and all property taxes paid during the calendar year.

If no property taxes paid, explain why. Enclosed with Return

COMPANY NAME _____

YEAR ENDING 12/31/2004

INCOME TAXES

For this reporting period, provide the following:

Federal Taxable Income Reported
Estimated or Actual Federal Tax Liability13,607.20
1450.00State Taxable Income Reported
Estimated or Actual State Tax Liability13,607.20
240.00

Amount of Grossed-Up Contributions/Advances:

Amount of Contributions/Advances
Amount of Gross-Up Tax Collected
Total Grossed-Up Contributions/AdvancesN/A

Decision No. 55774 states, in part, that the utility will refund any excess gross-up funds collected at the close of the tax year when tax returns are completed. Pursuant to this Decision, if gross-up tax refunds are due to any Payer or if any gross-up tax refunds have already been made, attach the following information by Payer: name and amount of contribution/advance, the amount of gross-up tax collected, the amount of refund due to each Payer, and the date the Utility expects to make or has made the refund to the Payer.

CERTIFICATION

The undersigned hereby certifies that the Utility has refunded to Payers all gross-up tax refunds reported in the prior year's annual report. This certification is to be signed by the President or Chief Executive Officer, if a corporation; the managing general partner, if a partnership; the managing member, if a limited liability company or the sole proprietor, if a sole proprietorship.

SIGNATURE

DATE

PRINTED NAME

TITLE

RECEIVED

MAR 04 2005

AZ Corporation Commission
Director Of Utilities

VERIFICATION
AND
SWORN STATEMENT
Intrastate Revenues Only

VERIFICATION

STATE OF _____
I, THE UNDERSIGNED
OF THE

COUNTY OF (COUNTY NAME)
NAME (OWNER OR OFFICIAL) TITLE
COMPANY NAME

DO SAY THAT THIS ANNUAL UTILITY REPORT TO THE ARIZONA CORPORATION COMMISSION

FOR THE YEAR ENDING

MONTH	DAY	YEAR
12	31	2004

HAS BEEN PREPARED UNDER MY DIRECTION, FROM THE ORIGINAL BOOKS, PAPERS AND RECORDS OF SAID UTILITY; THAT I HAVE CAREFULLY EXAMINED THE SAME, AND DECLARE THE SAME TO BE A COMPLETE AND CORRECT STATEMENT OF BUSINESS AND AFFAIRS OF SAID UTILITY FOR THE PERIOD COVERED BY THIS REPORT IN RESPECT TO EACH AND EVERY MATTER AND THING SET FORTH, TO THE BEST OF MY KNOWLEDGE, INFORMATION AND BELIEF.

SWORN STATEMENT

IN ACCORDANCE WITH THE REQUIREMENT OF TITLE 40, ARTICLE 8, SECTION 40-401, ARIZONA REVISED STATUTES, IT IS HEREIN REPORTED THAT THE GROSS OPERATING REVENUE OF SAID UTILITY DERIVED FROM ARIZONA INTRASTATE UTILITY OPERATIONS DURING CALENDAR YEAR 2004 WAS:

Arizona Intrastate Gross Operating Revenues Only (\$)
\$

(THE AMOUNT IN BOX ABOVE
INCLUDES \$
IN SALES TAXES BILLED, OR COLLECTED)

****REVENUE REPORTED ON THIS PAGE MUST INCLUDE SALES TAXES BILLED OR COLLECTED. IF FOR ANY OTHER REASON, THE REVENUE REPORTED ABOVE DOES NOT AGREE WITH TOTAL OPERATING REVENUES ELSEWHERE REPORTED, ATTACH THOSE STATEMENTS THAT RECONCILE THE DIFFERENCE. (EXPLAIN IN DETAIL)**

SUBSCRIBED AND SWORN TO BEFORE ME

A NOTARY PUBLIC IN AND FOR THE COUNTY OF

THIS _____ DAY OF

(SEAL)

MY COMMISSION EXPIRES _____

SIGNATURE OF OWNER OR OFFICIAL

TELEPHONE NUMBER

COUNTY NAME	
MONTH	, 20__

SIGNATURE OF NOTARY PUBLIC

VERIFICATION
AND
SWORN STATEMENT
RESIDENTIAL REVENUE
INTRASTATE REVENUES ONLY

RECEIVED

MAR 04 2005

AZ Corporation Commission
Director Of Utilities

VERIFICATION

STATE OF ARIZONA

I, THE UNDERSIGNED

OF THE

COUNTY OF (COUNTY NAME) <i>PIMA</i>	
NAME (OWNER OR OFFICIAL) <i>DANNY F. NG</i>	TITLE <i>PTR. OWNER</i>
COMPANY NAME <i>SLEEPY Hollow MALL HOME ESTATE</i>	

DO SAY THAT THIS ANNUAL UTILITY REPORT TO THE ARIZONA CORPORATION COMMISSION

FOR THE YEAR ENDING

MONTH	DAY	YEAR
12	31	2004

HAS BEEN PREPARED UNDER MY DIRECTION, FROM THE ORIGINAL BOOKS, PAPERS AND RECORDS OF SAID UTILITY; THAT I HAVE CAREFULLY EXAMINED THE SAME, AND DECLARE THE SAME TO BE A COMPLETE AND CORRECT STATEMENT OF BUSINESS AND AFFAIRS OF SAID UTILITY FOR THE PERIOD COVERED BY THIS REPORT IN RESPECT TO EACH AND EVERY MATTER AND THING SET FORTH, TO THE BEST OF MY KNOWLEDGE, INFORMATION AND BELIEF.

SWORN STATEMENT

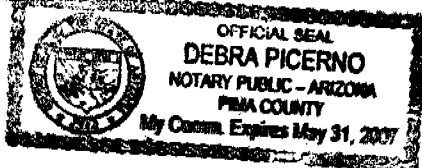
IN ACCORDANCE WITH THE REQUIREMENTS OF TITLE 40, ARTICLE 8, SECTION 40-401.01, ARIZONA REVISED STATUTES, IT IS HEREIN REPORTED THAT THE GROSS OPERATING REVENUE OF SAID UTILITY DERIVED FROM ARIZONA INTRASTATE UTILITY OPERATIONS RECEIVED FROM RESIDENTIAL CUSTOMERS DURING CALENDAR YEAR 2004 WAS:

ARIZONA INTRASTATE GROSS OPERATING REVENUES

\$ 13,607.20

(THE AMOUNT IN BOX AT LEFT
INCLUDES \$ 979.28
IN SALES TAXES BILLED, OR COLLECTED)

*RESIDENTIAL REVENUE REPORTED ON THIS PAGE
MUST INCLUDE SALES TAXES BILLED.



Danny F. Ng
SIGNATURE OF OWNER OR OFFICIAL *PTR. OWNER*
520-4407529
TELEPHONE NUMBER

SUBSCRIBED AND SWORN TO BEFORE ME

A NOTARY PUBLIC IN AND FOR THE COUNTY OF

THIS

4

DAY OF

NOTARY PUBLIC NAME	
COUNTY NAME <i>Pima</i>	
MONTH <i>Feb 4</i>	20 <u>05</u>

(SEAL)

MY COMMISSION EXPIRES

May 31, 2007

X

Debra Picerno
SIGNATURE OF NOTARY PUBLIC

FINANCIAL INFORMATION

Attach to this annual report a copy of the companies' year-end (Calendar Year 2004) financial statements. If you do not compile these reports, the Utilities Division will supply you with blank financial statements for completion and filing. **ALL INFORMATION MUST BE ARIZONA-SPECIFIC AND REFLECT OPERATING RESULTS IN ARIZONA.**

PIMA COUNTY			
STATE CODE MAP		PARCEL	AREA CODE
01	01	20007	1200
		PRIMARY TAX RATE PER \$100 ASSESSED VALUE 9.8715	
		SECONDARY TAX RATE PER \$100 ASSESSED VALUE 6.0286	
		IRRIGATION DISTRICT \$ PER ACRE	
VALUE IN DOLLARS		ASSESSMENT RATIO	ASSESSED VALUE IN DOLLARS
22,000		25.0	5,500
NET ASSESSED VALUE		5,500	
EXEMPTIONS		DIFFERENCE	
JURISDICTION		2004 TAXES	2003 TAXES
PRIMARY PROPERTY TAX		542.94	223.96
SCHOOL EQUAL.		25.08	28.30
SUNNYSIDE 12 PRI		232.61	270.74
PIMA COLLEGE PRI		61.29	68.15
COUNTY BONDS SEC		44.83	48.90
SUNNYSIDE 12 SEC		234.05	275.52
PIMA COLLEGE SEC		12.57	21.16
CEN ARIZ WTR SEC		6.60	7.20
LIBRARY DISTRICT		11.68	12.74
FIRE DIST ASSIST		2.35	2.65
TOTAL TAX DUE FOR 2004		855.02	979.68
TOTALS		855.02	124.66

PAYEE'S NAME AND ADDRESS
SLEEPY HOLLOW MOBILE HOME ESTATES
DANNY F NG
6001 S PALO VERDE -
TUCSON AZ 85706-4752

PLEASE MAKE YOUR CHECK PAYABLE TO
Beth Ford, Pima County Treasurer
and mail to:
Beth Ford
Pima County Treasurer
PO Box 98765
Phoenix AZ 85038-0765

PLEASE INCLUDE YOUR STATE CODE NUMBER ON YOUR CHECK.


THERE WILL BE A \$25 CHARGE FOR EACH RETURNED CHECK AND YOUR TAXES WILL REVERT TO AN UNPAID STATUS.

WATER WEAT TAX

Paid in full Dan

PAID ck # 3384 OCT-15-2004 S.H.

		JURISDICTION	2004 TAXES	2004 TAXES	2004 TAXES
PRIMARY PROPERTY TAX	542.94	PIMA COUNTY PRI	223.96	244.32	20.36-
		SCHOOL EQUAL.	25.08	28.30	3.22-
SS STATE AID TO EDUCATION	.00	SUNNYSIDE 12 PRI	232.61	270.74	38.13-
		PIMA COLLEGE PRI	61.29	68.15	6.86-
PRIMARY PROPERTY TAX	542.94	COUNTY BONDS SEC	44.83	48.90	4.07-
		SUNNYSIDE 12 SEC	234.05	275.52	41.47-
CONDARY PROPERTY TAX	312.08	PIMA COLLEGE SEC	12.57	21.16	8.59-
		CEN ARIZ WTR SEC	6.60	7.20	.60-
TOTAL TAX DUE FOR 2004	855.02	LIBRARY DISTRICT	11.68	12.74	1.06-
		FIRE DIST ASSIST	2.35	2.65	.30-

<p>MENT INSTRUCTIONS</p> <p>pay the 1st half installment, d the 1st half coupon with payment postmarked no r than Nov. 1, 2004. To pay 2nd half installment, send 2nd half coupon with your ment postmarked no later at May 2, 2005. The mini- m acceptable payment is 10% of the payment due, chever is greater.</p>	<p>0017552 01 AV 0.278 **AUTO T3 0 0781 85706-475299</p> <p><i>PAID IN FULL</i></p> <p>SLEEPY HOLLOW MOBILE HOME ESTATES DANNY F NG 6001 S PALO VERDE TUCSON AZ 85706-4752</p> <p><i>WATER WEAR TAX</i></p> <p>THERE WILL BE A \$25 CHARGE FOR EACH RETURNED CHECK AND YOUR TAXES WILL REVERT TO AN UNPAID STATUS.</p>	<p>Please make your check payable to Beth Ford, Pima County Treasurer and mail to:</p> <p>Beth Ford Pima County Treasurer PO Box 98765 Phoenix AZ 85038-0765</p> <p></p> <p>PLEASE INCLUDE YOUR STATE CODE NUMBER ON YOUR CHECK.</p>
--	--	--

Jon WATER WELL TAX 2004 *Silva*

3386

THIS CHECK IS DELIVERED FOR PAYMENT ON THE FOLLOWING ACCOUNTS	
DATE	AMOUNT
State Code	
#9010120007	
Tax	
PAID TO	
Jul	
2004	

SLEEPY HOLLOW MOBILE HOMES ESTATES

615 W. ALTURAS ST. PH. 520-624-7775
TUCSON, AZ 85705

DATE *OCT. 15-04*

PAY TO THE
ORDER OF

Beth Ford Pima County Treasurer

\$855.02

Eight hundred Fifty Five and 00/100

DOLLARS

BANK ONE, NA
PHOENIX, ARIZONA 85073
WWW.BANKONE.COM

Anthony F. Silva

⑈003386⑈ ⑆122100024⑆

20194252⑈